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## ABSTRACT

This paper presents data concerning the use and costs of center and family day care programs in Sweden. The typical center provides full-time care and has 4 sections, each with 2 preschool teachers, 1 attendant, and up to 20 children. In the family day care system, municipalities employ caregivers and parents pay the municipality. This paper discusses two studies in which: staff activities and social interaction were observed; data on staff/child ratios were collected; and parent and staff attitudes were assessed. The first study examined these factors for 6 day care centers; the second, for 29 caregivers and 110 parents involved in family day care programs. Results indicated that there were more toddlers in center care than family care, and more school-aged children in family care than center care. In family care programs, adults worked alone with a group of children; in centers, staff worked together with children. Educational activities were a dominant concern in center care; preparatory activities received precedence in family care. Family caregivers were more satisfied with their work than were center staff. On the whole, however, the results showed greater similarities than differences between center and family day care. A 15-item reference list is provided. (BC)

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## Quality aspects of Swedish family day care and center care.

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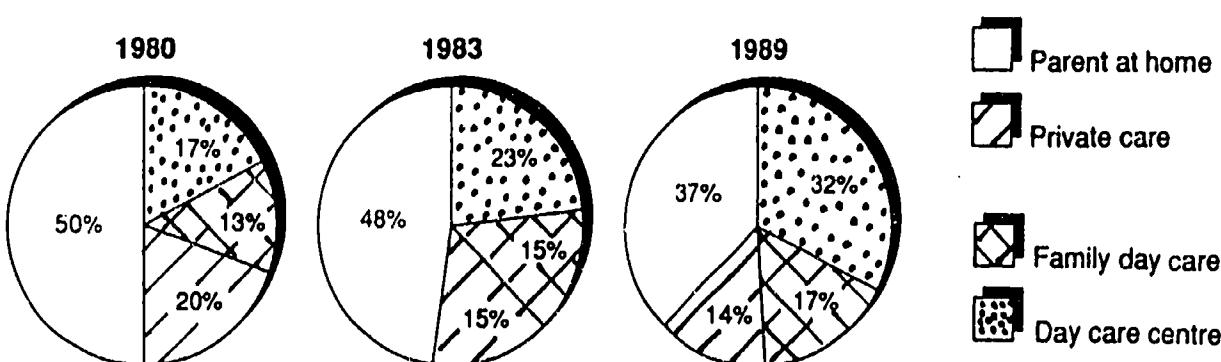
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**Swedish child care**  
In 1990 87% of all Swedish women with children below the age of seven work outside the home (5).

Although an unusually large number work parttime, there is very high demands for child care.

Sweden has about 8.6 million inhabitants of which 765 000 are children between zero to six (9). In 1990 49 % of all children between 4 months -6 years with working parents were placed in municipal center or family care regulated by governmental policy. For children 7-12 years old there are leisure time centers or family day care. The number of enrolled children 0-2 years old were 29%, for 3-6 years 64% and for 7-9 years 48 %. This figure drops to 7% for the older age group of 10-12 years old (14). Two times more of the children in municipal care were in center care than in family day care. Only 9 % of the children are in private out of home care (13). This means that society has assumed a major responsibility for ensuring that out of home care is available for families with children over 1 1/2 years of age with working or studying parents. ( See figure 1)

Child care, children aged 0-6 years, 1980, 1983 and 1989, percent



There is a socio-demographic variation in usage of municipal day care (14). About 10% of preschool children live in single parent families. 20 % of the municipal cared children come from a single parent family. Most single parents are employed, and their children are much more likely to receive municipal day care, particularly in nurseries, because their children are given priority in admission to nurseries. Almost 90% of single parents have their 0-6 years old children enrolled in municipal care.

There is also a clear connection between parents' educational and occupational levels and their use of day care. More white collar workers than blue collar workers use municipal care, and this connection is most evident for small children. Anderson (1) found that 50% of 1-2 years olds and 48 % of 2-3 years olds with working-class parents were cared for in their own homes, whereas for children from middle-class homes the figures were 35% and 29% respectively.

Sweden has today extensive and still growing day care services. Day care services, together with parental insurance, are an integral part of a larger system which comprises a number of measures aimed at improving conditions for children and parents.

In Sweden there are now more than 11 000 units for child care and a staff of 82 000 persons. The size of this sector is as big as the size of agriculture. In the view of the national authorities , day care is a right that ,in principle, may be enjoyed by all children if parents so wish. Thus financing public child care is divided between state , municipality and parents. Considering day care as a right of children, leads to the consequence that public funds finance most of the day care cost. The State's share of cost is covered by the " child care charge" a part of the social insurance contribution that all employers have to pay; at present this " charge" equals 2,2 % of employers' total salary budgets. Municipalities' day care costs are met from municipal taxes levied on companies and individuals, though none of this tax is earmarked for daycare. A family with an average income pays approximately 10% of its disposable income after tax if it has one child in municipal day care. If the family has two or more children cared for , the total charge is only marginally higher. There are large differences in this average figure between municipalities. Both income -related and standard charges are common, as municipalities are free to decide the level of charges and how charges are determined.

Table 1 Cost distribution of public child care. Average annual cost per child in US \$ and percent (1988)

	State subsidies	Parental Fees*	Municipality (net costs)	Total costs
Day care center	44%	12%	44%	11300
Part time group	13%		87%	2600
Family day care	25%	15%	60%	6650

\* Vary according to municipality and parental income.

Source : Swedish Association of Local Authorities

The total cost of day care is about 30 billion SEK per year ( 5 billion \$) in the financial year 1990-91 and this is around 2 % of our Gross National product. Parents insurance and child allowance together cost about the same as child care. This means that 4 % of the Swedish Gross National product goes to the children.(13)

#### **The current system of day care provision.**

Child care services in Sweden take a number of different forms. Preschool (förskola) is the general term used to denote nurseries or day-care centers(daghem), kindergartens or part-time groups (deltidförskola) and mothers clubs or open preschools. (See figure 2)

In daycare centers children usually receive full time care. The centers are usually open between 6.30 in the morning and 18.00 in the evening, Monday to Friday all year round. Children are divided into infant groups (0-3), sibling groups 2.5 to 6 years or extended sibling groups 1,5-12 years old.

**Size and structure of children's groups at day care centres**



	Age	Number of children	Staff ratio
infant group	1-3 years	10-12 children	2 full-time staff members per 5 children
sibling group	3-6 years	15-18 children	1 full-time staff member per 5 children
extended sibling group	1-12 years	15-18 children	same as infant or sibling groups

The average day care center has four groups or sections, each with some 12- 20 children. Each section usually has three members of staff, two pre-school teachers and one child care attendant. Leisure time centers are for schoolchildren aged 7-12 and are open before and after school as well as during school holidays. Two recreation instructors usually work with groups of 15-20 children. Recently the mixed age groups and extended sibling groups have decreased in popularity. Both the children below three and the six year olds are considered not to bee cared for in the best way in groups with very different ages. Grouping according to age has again, specially for children below three and more than seven, become the rule. (Sundell- Johansson 1991)

Family day care is the system by which the municipality employs family daycarers. The municipality pays the daycarers directly and the parents pay the municipality. To get a full salary the daycarers have to look after four children full time. As most day care centers only admit full time care, the amount of part time care with the daycarers is high. Often they take care of 8-10 part time children. On average the daycarer is responsible for 6.4 children, including her own. 40 % of municipal care is family day care (7,10).

The Swedish parliament legislates in matters concerning the aims: expansion and financing of child care. The National Board of Health and Welfare and the county administrations are together responsible for supervising the preschool and other forms of childcare nationwide. This involves for example dissemination of information, providing guidance, helping to develop skills, following up the quality and contents of the work of the preschool, and the planned expansion of services.

#### **Pedagogic programs for preschool and leisure time centers.**

In 1987 the National board of Health and Welfare published a "Pre-school Educational program" (8), in 1988 a similar program appeared for the leisure time centers. These programs "should also be seen as a guide for other child care for children as regards goals and orientation" which means that municipal family day care homes also are covered by the programs.

The aims behind these programs are to achieve good ,even quality, to stimulate development and to facilitate planning, supervision and evaluation of day care. From "The Preschool Educational program" the tasks of the Swedish pre-school can be summarized as follows:

- \* "Pre-schools should offer goal oriented and planned educational activities".
- \* "In pre-school, the children should be given good, secure and loving care and companionship, be given the support necessary to develop their personalities and social and intellectual competence; they should acquire greater knowledge of themselves and the world around them and be instilled with democratic values."
- \* "Pre-school exists for all children but has a particular responsibility for children who need special help in order to develop."
- \* "Pre-schools should be a complement to the home and the children's social and cultural environment in general and enable parents to combine parenthood and family life with work or studies. Its activities should be planned in close cooperation with the parents". ('Pre-school educational Program', p.12).

As child care in Sweden is the responsibility of the Board of Health and Welfare, day care services have always been more connected with and influenced by ideas and values in the health sector than by goals in the formal school sector. It is interesting to see that the preschool program presents an educational role as child care's first task. In the discussion of number of staff and group size the opinion is common that in order to be able to both stimulate the children intellectually and give them safe and secure care the groups ought to be smaller and more staff is wanted.

The Social Welfare Board in each municipality is responsible for expansion and organization ( of day care services and for implementing overall goals and orientation). The Swedish Parliament has decided that municipal guidelines for educational activities in preschool should be drawn up in each municipality. The municipalities are supposed to translate the general guidelines into their own specific programs. This means that the responsibility for day care has shifted from national to local level. From the 1980's the state gives more of general guidelines combined with support for research and development.

One of the consequences of Sweden's national family policy is a remarkable homogeneity of Swedish day care. This homogeneity is of special importance for questions of quality.

The formal aspects of quality in child care are regulated by conditions for State grants to municipalities, and by advice and directives issued by the National Board of Health and Welfare. The regulations are very detailed, there are rules about minimum area per children, how the premises should be planned, how the furniture and equipment should be designed etc.

Daycarers as well as center care workers are supposed to follow the central guidelines issued by the National Board. Childminding schemes are regulated and controlled in the same way as nurseries. A municipally employed childminding assistant has the responsibility to investigate , assess and choose daycarers; place children; provide daycarers with advice and support; organize, coordinate and develop activities for daycarers and children. Groups of daycarers work together and meet at least once a week in special premises or in open preschool. During these meetings games and activities are organized. Since the children get to know each other and also other daycarers, it becomes easier for the daycarers to substitute for each other. The quality of this form of care has increased very much due to supervision of the childminding assistants.

## **Staff training**

The training for pre-school teachers and recreation instructors takes the form of university courses of two and a half years' duration. Child care attendants are trained on special two-year programs in the upper secondary school. Also for daycarers a training of 100 hours introductory course is required.

National Board require that half the staff in each group in center care must be pre-school teachers and half child care attendants. Due to shortage of teachers, many "toddler groups" have only one teacher and three attendants. Each center also has a supervisor who is a qualified pre-school teacher, and a cook and assistants to clean and perform kitchen work.

### **The meaning of quality**

Quality could be seen from different perspectives.

- High Quality means the possibility of fulfilling the goals set for child care,
- it also means that parents get support in their parental role
- and that the children are afforded the possibility of stimulation for their development.

Quality could be divided into at least two dimensions. External or structural and internal or dynamic factors. Reports dealing with quality aspects of child care usually discuss structural factors as group size, child to adult ratio, age range and how many hours the children spend in day care. Also factors as training the staff is discussed. In Sweden we have a comparable high quality on structural factors due to our state regulated child care.

Among the dynamic factors the goals of the staff, their consciousness of the educational work, their pedagogical methods, their attitudes as well as the content in the care are important to analyze. These results could be used in a discussion about which type of care ought to be supported by the state, and as a help for parents if they have the possibility of choosing the type of care for their children.

The homogeneity of Swedish child care enables researchers to control some of the factors that otherwise would have to be dealt with as independent variables in the research design.

To answer the question what happens in the day care groups when the child/staff ratio decrease a study trying to combine structural and dynamic quality factors have been conducted. The subjects were 20 employees and 64 parents in 6 daycare centers (13).

In the day care study during a period equal to 5 weeks a total of 6312 observational units of staffs activities, social interaction and staff/children ratios were collected. The staff was interviewed about work experience, length of employment and attitudes to different aspects of their work. Parents were given questionnaires about attitudes to and experiences of the child care system.

Data was analyzed according to two questions. Are variations in the content and type of activities and type of social interaction among staff members related to variations in child/staff ratio? Do differences in activity contents and patterns have any impact on standards of quality in the overall activities in the groups?

In all six day care groups the most common activity of the employer was basic care as rest, dressing, changing diapers and meals (22-39% of the total time observed). When comparing the time spent on basic care, it was evident that groups with comparable more children below three had a greater proportion of this activity. Pedagogical activities as playing, reading stories, singing and group activities (9-30% of the observed time) as well as preparation of meals and activities, together with cleaning (13 to 20% of the time) were also common activities. Often (8-34%) the staff were "together with the children", giving body contact and talking to them. The employers also had breaks (2-18%) or talked (5-8%) to parents or colleagues.

Concerning the pattern of social interaction, the overall picture revealed that 49% of the observed units, two or more staff members together interacted with the children. 35% of the time the employee interacted solely with the children and 15% there was no interaction with children.

Most of the interviewed expressed a positive attitude to their work and agreed that the most important task is to create a safe, warm, and friendly atmosphere for the children. Some differences across the units were found, especially in questions concerning basic attitudes towards their own working team and the way one should deal with conflicts, private problems, cooperation etc. As the working situation at an organizational level as well as in the day to day activities demand teamwork, this fact is important to consider.

The results were summarized in a model, based on important components in the constructs of quality. The model extracts some of the variables which found to be important contributors to the way a pattern of activities and social interactions were formed in the studied center units.

Figure 2 Model of factors important for quality in day care

Factor	Group A	Group B	Group C
Caregiver/child ratio	High (*)	High (*)	Low (*)
Working goal	Unsure	Solidarity	Education
Working style	Discordant	Concordant	Concordant
Social interact.	>3 adults 2-3 children	2 adults/ >3 children	one adult/ >3 children
Activity	Low structure	Medium structure	High struct.
Parent attitude	Passive Displeased	Support Pleased	Educational Satisfied

(\*) high is 15 children and 3 adults , low is 19 children and 3 adults.

From an international perspective the enrolled child/adult ratio is very favorable, from a Swedish perspective only five children per adult is according to the recommendations given by the National board. It was suggested, that there is a critical ratio when the possibility of adding developmental activities to the necessary ones as caring and watching is decreased. Exactly what this critical ratio is depends on the staff teams' way of organizing their work, their motivation to cooperate and their sense of unity. In units with the same child/staff ratio, but with different levels of consensus in the staff group, there were considerable

variations in social interactions and activities. According to this study variations in observed patterns of activities and social interactions could not be explained only by referring to variations in child/staff ratio. More adults per children increased child-oriented activities and close interaction with the children only if the staff agreed on goals and methods in their work.

### **Quality factors In family day care**

40 % of municipal child care in Sweden is family day care. The high proportion motivates an analysis of family daycare activities. Family day care home's often are situated close to the homes of the children in their neighborhood environment. The children spend their day in a home environment and take part in different home activities. This gives an opportunity to learn about regular activities in an ordinary environment. The smaller group size might give the child special opportunity for care and attention. The closeness to parents increase the possibility for natural contact between parents and daycarers. The parents need only to deal with one person.

In this study of family day care the design was similar to the center care study. The activity pattern of the daycarers, the social interactions between adults and children, the attitudes of the daycarers to their job and the parents attitudes to the care of their children were analyzed (11).

There are special difficulties in the study of family day care as the uniqueness of the home environment and the influence of the personal factor of the careprovider. But there are still some important general features to consider.

29 daycarers and 110 parents were observed and/or interviewed in the same way as the staff in the project above. The mean number of children cared for was 7.4. 20 560 minutes were observed. The observation period is equal to 2 months of working time (11).

During the observation period the mean caregiver child ratio was 4.1. The daycarers interacted socially 75% of the observed period. Most frequently (27%) the daycarer interacted with 2 or 3 children. 85% of total time was spent on care preparations, pedagogical activities, being together and passive activities.

According to observation data the daycarers are able to stimulate and interact with the children during 2/3 of the time when they are dealing with activities as cleaning and cooking.

Most daycarers give the children opportunity to take responsibility in such activities as laying the table and cleaning up. They also produce useful things such as cookies or different handicraft. Once a week half of the daycarers and their children take part in physical group activities and every second week 2/3 of them visit museums, libraries or theaters.

According to this study daycarers and parents express their satisfaction with the situation. The structural quality aspects are compared to daycare center's smaller groups and lower adult to child ratios.

## **Comparison of quality factors in center care and family day care.**

Both politicians who have to decide on what to expand, center or family care and parents need to know what type of care would suit best. When center care and family care are compared, are the dynamic aspects of quality of care different and what are these differences? First we will compare background factors in family care and center care.

According to table 2 and 3 there are more toddlers present in center daycare and more schoolchildren in family daycare. When we compare the age of the adults it is seen that the staff in daycare centers are mostly between 20 and 30 years old and younger than most daycarers , who most are between 30 and 50 years old.

When the children to adult ratios were compared it was found that there were two more children present per adult in family care than in center care.

**Table 2 Age of the children in center care and in family day care**

	Daycare centers		Family day care	
toddlers	28 %	<3 years	16 %	<4 years
preschool children	55 %	3-7 years	49 %	4-7 years
schoolchildren	17 %	7-12 years	36 %	7-12 years

**Table 3 Center care staff's and daycarers' distribution of age in percent and frequency.**

Age	20-30	31-40	41-50	>50
Center staff	80% (16)	15% (3)	5% (1)	-
Daycarers	11% (3)	39% (11)	32% (9)	18% (5)

The patterns of social interaction differ in family day care and center care. From table 4 and figure 3 we see that daycarers work alone with a small group of children ( 65%), while in day care centers the adults work together and take responsibility alone for children in 35% of observed time.

**Table 4 Pattern of social interaction between children and adults and between adults for day care centers and family day care.**

Interaction pattern	Center care	Family day care
1 adult 0 children	7%	16%
1 adult 1 child	11%	19%
1 adult 2-3 children	12%	27%
1 adult > 3 children	12%	19%
Several adults 0 children	8%	9%
Several adults 1-3 children	12%	7%
Several adults > 3 children	37%	3%

**Figure 3**  
**Dominant interaction pattern**

family day care	center care
* no interaction	* one or two adults interact with one or two children
* only childinteraction	
* interaction with one child	
* " " 2-3 children	* at least 3 adults interact with at least 3 children
* " " > 3 children	

What we have seen so far are the differences in background, in adult /children ratios and interaction pattern. For quality also activity pattern is important. Differences in activity patterns are presented in table 5.

**Table 5 Proportion of time for main activity categories.**

Activity category	Center care	Family Day care
Care	30%	30%
Preparations	15%	25%
Being together	11%	10%
Educational activities	22%	15%
Conversation to adults	6%	5%

According to the table above there are some differences in the activity pattern. In center care more of the time is used in educational activities and in family care there is a higher proportion of preparations. Activities such as receiving or leaving children, meals, playing games, showing and instructing as well as being together are equally common in day care centers and in family day care.

In the interviews it appeared that daycarers were much more satisfied with their work than staff in child care centers.

**Tabel 6 Comparison of work satisfaction beween daycarers and staff in child care centers.**

	satisfied			dissatisfied	
	+++	++	+-	--	---
Center staff					
Daycarers	5	19	5	2	

The study of the center staff was done during a period of change in their organization. This could explain their negative attitudes and could be an artefact. Apart from the obvious differences of age and circumstances of the two types of care. When the rules and norms for different activites were compared,

amount of responsibility for the children, how often they make useful things, schoolpreparations, learning to sit quiet, and how much adults took part in the games of the children were equally common in center and family day care. In center care the children had more opportunity to experience cultural activities and study the work of adults, where as in family day care there were greater possibilities to play and construct without the intrusion of the adults, they also learnt more about the nature and had more of physical training.

Differences between family day care and center care are put together in a model presented below.

Figure 4. Differences between family day care and center care

Family day care	Center care
* Realitybased	Simulated
* The daycarer decide by herself when and how to work	Joint planning of the staff The result dependant on how similar their ideas are
* Activities are geared to parents timetable	Rutines independant of parents timetable
* Age varies between 1-12 years	Groups according to age
* Individualized care	Group care
* Consistency due to the same caregiver during a long period of time	Inconsistency if there are different ideas of childmanagement
* Closeness because of the private' home atmosphere	Formal contacts
* More contact between parents and caregivers	Parents meet a group of staff and an "institution"

A comparison of the above described results from studies of social interaction, activity patterns and attitudes in center and family care reveal that the similarities in social interaction, activity pattern and attitudes of the two caring forms are greater than the differences. This must be interpreted as a result dependant on two facts. Firstly center care as well as municipal family care are both carefully regulated by the "Preschool Educational program" issued from the National Board of Health and Welfare. Secondly the organization of daycarers into groups, which meet every week and are supervised by their special family day care assistant makes the daycarers understand and follow the program in the same way as center care staff do.

The difference in social interaction between family care and center care is the fact that daycarers work alone with children 65% of the time compared to 35% for employees in day care centers.

More of the daycarers express satisfaction with their work situation than staff persons in center care. Also parents expressed a higher degree of satisfaction with the care in family care than in center care.

Looking carefully at dynamic aspects of quality of care means that the attitudes of the employees and what they actually do together, how the educational guidelines are implemented, how sensitive the staff are to individual needs and characteristics, how well developed staff-parent cooperation etc. is assessed.

Several of these dynamic quality factors have been discussed in this paper. Even if quality in relation to child development seems to be very good, several of the dynamic factors in the Swedish day care system need to be improved.

In Sweden for most people family day care has not the same good reputation as center care. Most persons think children are just present in the family day care home and that the daycarer is only cooking and cleaning.

The results presented in this paper were very far from the above picture. Of the different reasons for the good quality in family day care the quality of work of the supervisor seems to be most important.

#### References:

- (1) Andersson, B.E. (1986) Home care or external care. Report No. 2 from the Stockholm institute of Education
- (2) Cochran,M.; (1977) A comparison of group day and family child-rearing patterns in Sweden. Child Development, 48, 702-707.
- (3) Cochran, M., & Gunnarsson, L. (1985) A follow-up study of group day care and family-based childrearing patterns. Journal of Marriage and the Family, 47, 297-309.
- (4) Ekholm,B. Ekholm,M. Hedin,A (1982) Daghemsklimat Bakgrund Syfte och mästinstrument. Rapport Pedagogiska institutionen Universitetet i Linköping
- (5) Gunnarsson, L. (1978) Children in day care and family care in Sweden- A follow-up. Department of Educational Research, University of Gothenburg, Research Bulletin No. 21.
- (6) Hwang, P.,Broberg,A.,Lamb,M.(1990) "Swedish childcare research" in "Day care for young children: International perspectives Policy and research in five countries" ed: Melhuish E. Moss P. London Routledge
- (7) Hårsman, I. (1984) The emotional and social adjustment of infants to Day Care Centers. Paper presented at the international Conference on Infant Studies , April 5-8.
- (8) Johansson B , Sundell K (1990) Utvigglade syskongrupper- en återväntsgränd? Uppsala Universitet psykologiska inst
- (9) Melhuish,E.; Moss,P.,(1990) "Current and future issues in policy and research" in "Day care for young children: International perspectives Policy and research in five countries" ed: Melhuish E. Moss P. London Routledge
- (10) Palmérus,K ;(1988) Caregiver -Child ratio in Day care center groups: impact on verbal interactions. Paper presented at the Third European Conference on Developmental Psychology, Budapest 15 -19 juni 1988.
- (11) Palmérus, K; (1990) " Quality aspects of family day care" Paper presented at the IVth European Conference on Developmental Psychology 27-31 Aug 1991 Sterling Scotland UK.
- (12) Palmérus,K; Lindahl, L; (1991)" Olika hög kvalitet eller unika kvaliteter? En jämförande analys av kvalitetsfaktorer i familjedaghem och daghem." Rapport nr 1991:4 Institutionen för pedagogik Göteborgs universitet. (35s)

(13) Palmérus, K; Hägglund, S; (1991) The impact of children /caregiver ratio on activities and social interaction in six day care center groups. Early Child Development and Care. vol 67 sept 1991 (in press)

(14) Palmérus, K; (1991) "The Impact of Ratio of Children / Caregiver on Social Interaction and Activity Pattern in a Day care Center" Early Child Development and Care. vol 71 1991 ( in press)

(15) Svenning, C. & Svenning, M. ( 1979) Daghemmen, Jämlikheten och Klassamhället. Lund. Liber läromedel